STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECE	IVED	
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

OIL CONSERVATION DIVISION OIL CON. DIV.

P.O. BOX 2088

P.O. BOX 2088

DIST. 3

REQUEST FOR ALLOWABLE

RANSPORTER GAS			
PERATOR	DE OU AND MATHDAL CARD		
RORATION OFFICE AUTHORIZATION TO TRANSPO	ORT OIL AND NATURAL GAS		
Operator	207		
Tenneco Oil Company			
Address	Oll Co		
P. O. Box 3249, Englewood, CO 80155	CONI		
Reason(s) for filing (Check proper box)	Other (Please explain)		
New Well Change in Transporter of:			
Dry Gas			
Condensate			
Al Change in Ownership			
DESCRIPTION OF WELL AND LEASE	O. Box 4990, Farmington, NM 87499		
Lease Name Well No. Pool Name, Including Formatic	State, Federal or Fee		
San Juan 32-9 Unit 93 Blanco PC Ext	SF 078389A		
Location			
OFF Courth	Line and 1460 Feet From The East		
Unit Letter 0 :955 Feet From The SOULT	Line and		
Line of Section 12 Township 31N	Range 10W NMPM, San Juan county		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	of this form is to be sent!		
Name of Authorized Transporter of Oil 🗆 or Condensate 🗸	Address (Give address to which approved copy of this form is to be sent)		
Conoco Inc. Surface Transportation	P. O. Box 460, Hobbs, NM 88240		
Name of Authorized Transporter of Casinghead Gas □ or Dry Gas 🕻	Address (Give address to which approved copy of this form is to be sent)		
	P. O. Box 4990, Farmington, NM 87499		
El Paso Natural Gas	Is gas actually connected? When		
If well produces oil or liquids, 0 12 31N 10W	Yes		
give location of tanks.	163		
If this production is commingled with that from any other lease or pool, give commingling order number_			
NOTE: Complete Parts IV and V on reverse side if necessary.			
VI. CERTIFICATE OF COMPLIANCE	APPROVED, 19, 19		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.	BY Srank J. Jave		
	TITLE SUPERVISOR DISTRICT # 3		
Sat M=king	This form is to be filed in compliance with RULE 1104.		
(Signature)	If this is a request for allowable for a newly drilled or deepened well, this form must be accom-		
Senior Regulatory Analyst	panied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allowable on new and recompleted walls		
(Title)	All sections of this form must be filled out completely for allowable of the and recompletely for allowable of the and recompletely for allowable of the and or number, or transporter fill out only Section 1, II, III, and VI for changes of owner, well name and or number, or transporter		
Fill out only Section I, II, III, and VI for changes of owner, well name and of the			

Separate Forms C-104 must be filed for each pool in multiply completed wells.